

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	W.A.		02/16/01
O.I.P.E. CLASSIFIER		8	7/22/01
FORMALITY REVIEW	L.T.	1106	8/22/01
RESPONSE FORMALITY REVIEW	110	300	8/10/01

09/903/89  
 canceled  
 claim?  
 12/8/03 amot

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 (Through numerals)..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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03-01-02  
 03-01-02  
 03-01-02